

# GENERAL MOTORS ACCESSIBILITY REIMBURSEMENT APPLICATION

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## 4. VALIDATE APPLICATION AT GM DEALER

Take your adapted vehicle and application to your GM dealer. Have your GM dealer representative sign the application. If you are physically unable to return to the GM dealer you bought the vehicle from (e.g., you are now residing in another state or have moved a considerable distance from your original dealer), any participating GM dealer representing the brand purchased may sign your application. If your Chevrolet Traverse is equipped with a BraunAbility® lowered floor conversion, you are not required to complete Dealer Information or Confirmation section listed below. Please go to Step 5.

## DEALER INFORMATION

Dealer Name: \_\_\_\_\_

Dealer BAC Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

## CONFIRMATION (REQUIRED)

I have examined the eligible vehicle identified on this application, and it is equipped with the adaptive accessibility equipment described on the attached invoice(s).

GM Dealer Representative Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

### Send reimbursement payment to (check one):

The GM dealer above  The vehicle purchaser

If the dealer is requesting payment, one of the following documents must accompany the application:

- Customer Incentive Acknowledgment and/or Assignment Form
- Copy of dealer check(s) issued to equipment installer(s)
- Copy of sales contract reflecting accessibility incentive deduction

## 5. VERIFY YOUR APPLICATION IS COMPLETE

Gather your reimbursement application and all necessary attachments. **Incomplete applications will delay claims processing. Make sure you have the following:**

- Copy of itemized invoice(s), including proof of payment
- Letter of authorization from your lessor if this is a leased vehicle
- If dealer is requesting payment, remember to provide ONE of the following: Customer Incentive Acknowledgment and/or Assignment Form, copy of dealer check(s) issued to adaptive equipment installer(s), or copy of sales contract reflecting accessibility incentive deduction
- Copy of completed and signed reimbursement application

## 6. APPLICATION SUBMISSION

Fax or email your application and all required attachments to:

Fax to:  
1-866-234-3036

Email to:  
mobility@gm.com

PLEASE KEEP A COPY OF THE APPLICATION AND ALL SUPPORTING DOCUMENTS FOR YOUR FILES.

This claim and any payment made under this claim are subject to the Official Program Rules and Guidelines that are in effect from 1/3/23 to 1/2/24 and have been made available to all authorized GM dealers. General Motors reserves the right to modify or terminate this program without notice.

SERVICE REQUEST NUMBER FOR INTERNAL USE ONLY

REMOVE, COMPLETE AND RETURN FORM



REIMBURSEMENT PROGRAM FEATURING  
ONSTAR BUSINESS SOLUTIONS



Providing the capability and  
confidence to live a life in motion.

Vehicles shown throughout with equipment from independent suppliers which is not covered by the GM New Vehicle Limited Warranty. GM is not responsible for the safety or quality of independent supplier alterations.



## Up to \$1,500 Reimbursement on Adaptations.

Through the General Motors Accessibility Reimbursement Program, customers who purchase or lease an eligible 2023/2024 model year vehicle receive up to \$1,500<sup>1</sup>, or up to \$1,200<sup>1</sup> for a 2022 model year vehicle, when they add eligible accessibility-related equipment to their new Chevrolet, Buick, Cadillac or GMC vehicle.

## Plus Two Years of OnStar® and Remote Access Plan— Only From General Motors.

Customers who purchase properly equipped eligible GM vehicles also get 2 years of the OnStar Safety & Security Plan<sup>2</sup> Coverage and Remote Access Plan<sup>3</sup> with available Wi-Fi® Hotspot<sup>4</sup> when eligible adaptive equipment is installed. This offer is on top of the OnStar Safety & Security coverage and Connected Services<sup>5</sup> trial included on new GM eligible vehicles.



To get an application or learn more, visit <https://www.gmenvolve.com/accessible-vehicles> or call 1-800-323-9935 or TTY 1-800-833-9935.

At the touch of a button, OnStar connects you to a real person, 24/7— with a world of services to help you stay connected safely, including:

### OnStar:

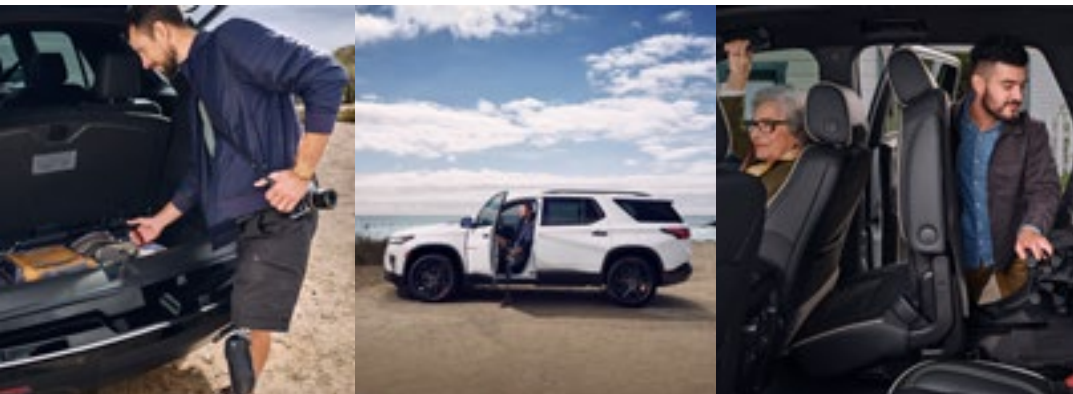
- Automatic Crash Response<sup>6</sup>
- Emergency Services<sup>6</sup>

### Remote Access:

- Remote Door Unlock (requires power door locks)<sup>7</sup>
- Vehicle Diagnostics<sup>8</sup>

<sup>1</sup>Receive up to \$1,500 on 2023/2024MY and up to \$1,200 on 2022MY eligible vehicles. See Dealer and General Motors Accessibility Program Reimbursement Application for complete program details, limitations and eligibility. Offer ends 1/2/24. GM regular production options and accessories are not eligible for reimbursement under the General Motors Accessibility Program, except for OnStar TTY equipment and seat belt extenders. This includes, but is not limited to, assist steps/running boards and all aftermarket equivalents. Call the General Motors Accessibility Program Assistance Center if you have questions about equipment eligibility. <sup>2</sup>OnStar plan, working electrical system, cell reception and GPS signal required. OnStar links to emergency services. See onstar.com for details and limitations. <sup>3</sup>Remote Access Plan does not include emergency or security services. See onstar.com for details and limitations. <sup>4</sup>Service varies with conditions and location. Requires active OnStar services and paid data plan offered by AT&T. <sup>5</sup>Connected vehicle services vary by vehicle model and require active service plan, working electrical system, cell reception and GPS signal. OnStar links to emergency services. See onstar.com for details and limitations. <sup>6</sup>OnStar links to emergency services. Not all vehicles may transmit all crash data. <sup>7</sup>Requires subscription to Remote Access Plan or Unlimited Access Plan. Services are subject to user terms and limitations and vary by vehicle model. Unlock feature requires automatic locks. Remote start requires GM factory-installed and enabled remote start system. Visit onstar.com for more details. <sup>8</sup>Diagnostic capabilities vary by model and plan. Message and data rates may apply. Requires contact method on file and enrollment to receive alerts. Not all issues will deliver alerts. See onstar.com for details and limitations.

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Please review the step-by-step instructions and list of eligible adaptive equipment found at <https://www.gmenvolve.com/fleet/vehicles/upfit-applications/accessible-vehicles>. Incomplete applications will delay claims processing. If you have questions or need help, please contact the GM Accessibility Assistance Center at 1-800-323-9935 (TTY 1-800-833-9935).

Eligible adaptive equipment must be permanently installed in the vehicle, and installed for a driver or passenger with a permanent disability. Seat belt extenders are eligible for reimbursement but do not qualify for OnStar® Safety & Security offer.

This application is valid for eligible new and unused 2022-2024 model-year Chevrolet, Buick, Cadillac and GMC vehicles delivered between 1/3/23 to 1/2/24. Vehicles must be adapted, and a claim must be submitted within six months of the date of purchase/lease.

You have chosen to hire your own accessibility equipment installer to alter your vehicle. By offering an incentive, GM is not reviewing or taking any responsibility for the quality or safety of your alteration. Please consult the vehicle alterer making changes to your vehicle to ensure that the work done on your vehicle is consistent with the Federal Motor Vehicle Safety Act. Alterations are not covered under the GM New Vehicle Limited Warranty.

### 1. OBTAIN ADAPTIVE EQUIPMENT AND PURCHASE RECEIPT

- TTY equipment requested
- After your vehicle adaptations are completed, obtain an itemized paid invoice from the licensed equipment installer(s). The invoice must include the following:
  - Preprinted installer company name, address, and phone number
  - Your name, address, and phone number
  - Vehicle Identification Number (VIN)
  - Description of the adaptive equipment installed on vehicle
  - Date of adaptation (sale)
  - Itemized cost of parts AND labor (listed separately)
  - Proof of payment for the adaptation (copy of credit card receipt, canceled check, or paid invoice)

### 2. VEHICLE PURCHASER INFORMATION – PLEASE USE BLUE OR BLACK INK AND COMPLETE ALL INFORMATION

#### PURCHASER INFORMATION

Mr.  Ms. \_\_\_\_\_ LAST FIRST M.I.  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State/ZIP \_\_\_\_\_/\_\_\_\_\_  
 Home Phone # (\_\_\_\_\_) \_\_\_\_\_  
 Work Phone # (\_\_\_\_\_) \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Vehicle sold/traded in:  
 Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_  
 First-time GM Accessibility Reimbursement Program user?  
 Yes  No  
 Primary personal accessibility aid used:  Wheelchair  
 Scooter  Cane/Walker/Crutches  Other  None

#### VEHICLE/EQUIPMENT INFORMATION

Vehicle ID No. (VIN) \_\_\_\_\_  
 Delivery Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_  
 Check appropriate box:  
 Retail Sale  Retail Lease  Commercial Sale

#### DESCRIPTION OF ADAPTIVE EQUIPMENT INSTALLED

Date of Adaptation \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Total Cost of Adaptation \$ \_\_\_\_\_  
 Reimbursement Amount Requested\* \$ \_\_\_\_\_

\*Please see dealer or <https://www.gmenvolve.com/fleet/vehicles/upfit-applications/accessible-vehicles> for limits.

For information on GM's privacy statement, please visit [gm.com/privacy](https://gm.com/privacy) or call 1-866-MY-PRIVACY (1-866-697-7482).

REMOVE, COMPLETE, AND RETURN FORM

### 3. REVIEW AND SIGN APPLICATION (VEHICLE OWNER[S] OF RECORD)

I/We certify that the information entered on this application is correct and that the adaptive equipment described on the attached invoice(s) has been permanently installed on the eligible GM vehicle identified on this application. I/We understand that GM has no responsibility for my vehicle alterations.

_____	_____	_____	_____
Purchaser/Lessee Signature	Date	Co-Purchaser/Co-Lessee Signature	Date
_____	_____	_____	_____
Print Name		Print Name	

**GO TO STEP 4 ON REVERSE. >**